HOMESTEAD REMOVAL AFFIDAVIT

CONSIDER THIS MY NOTIFICATION THAT I HAVE CHANGED MY RESIDENCY AND SHOULD NO LONGER RECEIVE THE HOMESTEAD CLASSIFICATION IN BECKER COUNTY.

PARCEL NUMBER:	
OWNER'S NAME(S):	
OWNER'S PREVIOUS ADDRESS:(BECKER COUNTY)	
OWNER'S NEW ADDRESS:	
I DECLARE THAT I (WE) NO LONGER ABOVE REFERENCED PARCEL AS OF	WISH TO CLAIM HOMESTEAD STATUS ON THE
(DATE THAT YOUR BECKER COUNTY RESIDENCE):	, 20 Y PROPERTY WAS NO LONGER YOUR PRIMARY
DATE:	DATE:
OWNER'S SIGNATURE	OWNER'S SIGNATURE
TO BE COMPLETED BY COUNTY ASS	SESSOR'S OFFICE:
THEREFORE, THE REMOVAL OF THE FOR THE ASSESSMENT Y	HOMESTEAD CLASSIFICATION WILL BE EFFECTIVE YEAR, FOR TAXES PAYABLE IN